Case 20-20432-ABA Doc 44 Filed 11/11/22 Entered 11/11/22 08:56:49 Desc Main Document Page 1 of 7

Fill in this information to identify your case:							
Debtor 1	Kim Waddy						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JEI	RSEY CAMDEN VICINAGE				
Case number	20-20432-ABA						
(II KIIOWII)							

Check if this is an amended filing

page 1 of 2

Official Form 106Sum

e a	mmary of Your Assets and Liabilities and Certain Statistical Information as complete and accurate as possible. If two married people are filling together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filling amendated the bound of the complete the state of the complete the complet		
	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. t1: Summarize Your Assets		
rai			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	155,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,870.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	166,870.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	265,680.32
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	69,152.88
	Your total liabilities	\$	334,833.20
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,317.68
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,900.35
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for		l familie an

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Kim Waddy Case number (if known) 20-20432-ABA

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,058.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	43,274.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	43,274.00

Case 20-20432-ABA Doc 44 Filed 11/11/22 Entered 11/11/22 08:56:49 Desc Main Document Page 3 of 7

Fill	in this information to identify your ca	ase:							
Deb	otor 1 Kim Waddy				_				
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	ERSEY CAMDEN VIC	INAGE	_				
Cas	e number 20-20432-ABA				Che	ck if this is:			
(If known)			-			An amende	d filing		
								postpetition (chapter
<u>O</u> 1	ficial Form 106l				į	MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spoi	olying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing wi	ith you, do not includ	e infori	mation aboເ	ıt your spo	use. If mo	re space is n	eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job,	Empleyment status	■ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Children's Crisis Center	Treati	ment				
	Occupation may include student or homemaker, if it applies.	Employer's address	1080 N. Delaware Philadelphia, PA						
		How long employed t	here?						
Par	t 2: Give Details About Mor	•				_			
Esti	mate monthly income as of the date unless you are separated.	-	you have nothing to re	oort for	any line, writ	te \$0 in the	space. Incl	ude your non	-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	employers fo	r that perso	n on the lin	es below. If y	ou need
					For De	ebtor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,266.48	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$\$	266.48	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Kim Waddy	-	Case	number (if known)	20-20432-4	ВА	
	0	or Proc. Albany		For	Debtor 1	For Debtor	spouse	
	Сор	y line 4 here	4.	\$_	2,266.48	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	514.28	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$_ \$	0.00	\$ \$	N/A N/A	
	5e.	Insurance	5e.	\$ -	96.23	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	610.51	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,655.97	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Behavior Analysis & Therapy, PA Second border Third border Annuity	8c. 8d. 8e. - 8f. 8g.	\$\$ \$\$\$ \$\$\$\$\$	0.00 0.00 0.00 0.00 0.00 0.00 761.71 600.00 600.00 700.00	\$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A N/A N/A	1
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,661.71	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,317.68 + \$_	N/A	= \$	4,317.68
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•	ed in <i>Schedul</i> e	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						4,317.68
13.	Do y ■	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?				Combine monthly	

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:			
Deb	tor 1 Kim Waddy	Ch	eck if this is:	
			An amended filing	
	tor 2	🗆 🗆	A supplement show 13 expenses as of	wing postpetition chapter
(Spo	ouse, if filing)		13 expenses as or	the following date.
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY CAN VICINAGE	MDEN	MM / DD / YYYY	
	e number 20-20432-ABA nown)			
O	fficial Form 106J			
So	chedule J: Your Expenses			12/15
info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this inher (if known). Answer every question.			
Par 1.	t 1: Describe Your Household Is this a joint case?			
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?			
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Household of De	ebtor 2.	
0	De very house demandants?			
2.	Do you have dependents? ■ No			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.			☐ Yes
				□ No
				☐ Yes
				□ No
			<u> </u>	☐ Yes ☐ No
				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes			1 103
	t 2: Estimate Your Ongoing Monthly Expenses			
exp	imate your expenses as of your bankruptcy filing date unless y senses as of a date after the bankruptcy is filed. If this is a supp plicable date.			
	lude expenses paid for with non-cash government assistance if			
	value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)	our income	Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage 4.	\$	1,330.69
	If not included in line 4:			
	4a. Real estate taxes	4a.		0.00
	4b. Property, homeowner's, or renter's insurance	4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses	4c.	·	100.00
5.	 Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor 	4d. me equity loans 5.	•	0.00

Debtor	1 Kim Waddy	Case number	(if known)	20-20432-ABA
6. Ut	ilities:			
6a	. Electricity, heat, natural gas	6a. \$		275.00
6b	. Water, sewer, garbage collection	6b. \$		130.00
6c	Telephone, cell phone, Internet, satellite, and cable services	6c. \$		223.00
6d	l. Other. Specify: Cell Phone	6d. \$		65.00
. Fo	ood and housekeeping supplies	7. \$		470.00
	nildcare and children's education costs	8. \$		0.00
Cle	othing, laundry, and dry cleaning	9. \$		100.00
	ersonal care products and services	10. \$		100.00
	edical and dental expenses	11. \$	-	10.00
	ansportation. Include gas, maintenance, bus or train fare.	🗸		10.00
	o not include car payments.	12. \$		240.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$		100.00
	naritable contributions and religious donations	14. \$		0.00
	surance.	,	-	
Do	o not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a. \$		0.00
15	b. Health insurance	15b. \$		14.00
15	c. Vehicle insurance	15c. \$		220.00
	d. Other insurance. Specify:	15d. \$		0.00
	ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	pecify:	16. \$		0.00
	stallment or lease payments:			<u> </u>
	a. Car payments for Vehicle 1	17a. \$		392.66
	b. Car payments for Vehicle 2	17b. \$		0.00
	c. Other. Specify:	17c. \$		0.00
	d. Other. Specify:	17d. \$		0.00
	our payments of alimony, maintenance, and support that you did not report a			0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I)			0.00
). Ot	ther payments you make to support others who do not live with you.	\$	-	0.00
	pecify:	19.		0.00
	her real property expenses not included in lines 4 or 5 of this form or on Sci		Income.	
	a. Mortgages on other property	20a. \$		0.00
	b. Real estate taxes	20b. \$		0.00
	c. Property, homeowner's, or renter's insurance	20c. \$		0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$		0.00
	e. Homeowner's association or condominium dues	20e. \$		0.00
		20e. \$ 21. +	<u> </u>	
	ther: Specify: Auto maintenance			50.00
To	olls		\$	80.00
. Ca	alculate your monthly expenses			
	la. Add lines 4 through 21.		\$	3,900.35
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	,	\$	
			·	2 000 25
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,900.35
. Ca	alculate your monthly net income.	(J
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		4,317.68
	b. Copy your monthly expenses from line 22c above.	23b\$	S	3,900.35
_5	127			
23	c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c. \$		417.33
		-	_	
For	by ou expect an increase or decrease in your expenses within the year after to rexample, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			ease or decrease because of a
For	r example, do you expect to finish paying for your car loan within the year or do you expect yo			ease or decrease because of a

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kim Waddy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY CAMDEN VICINAGE	
Case number (if known)	20-20432-ABA			
(II KIIOWII)				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Di	d you pay or agree to pay someone who is NOT	Γ an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
tha	t they are true and correct. /s/ Kim Waddy	I the summary and schedules filed with this declaration and
	Kim Waddy	Signature of Debtor 2